

OFFICE OF DOMESTIC OPERATIONS

CREDIT CARD PROCESSING

NAME OF EVENT: *Women in Business Mission*

EVENT REF. NO.: *????*

LOCATION: *Amsterdam, the Netherlands / Brussels, Belgium*

CONTACT: *Mara Yachnin*

PROJECT CODE: *????*

DATE: *October 23-27, 2006*

TELEPHONE: *202-???*

CLIENT INFORMATION

NAME: _____ TITLE: _____

COMPANY: _____

ADDRESS: _____

CITY: _____ STATE : _____ ZIP: _____

TELEPHONE: _____ FAX: _____ E-MAIL: _____

AMOUNT TO BE CHARGED: *\$2,700.00*

METHOD OF PAYMENT: ☐ MASTERCARD ☐ VISA ☐ AMEX

CREDIT CARD NUMBER: _____

EXPIRATION DATE: _____

CARDHOLDER NAME: _____

CARDHOLDER'S SIGNATURE: _____

ACCOUNTING DIVISION USE ONLY